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## PART B - FEE(S) TRANSMITTAL

Complete and send this form together with applicable fee(s), to: Mail

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000027777 7590 01/24/2006 PHILIP S. JOHNSON JOHNSON & JOHNSON ONE JOHNSON & JOHNSON PLAZA NEW BRUNSWICK, NJ 08933-7003				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  Mary E. Tricario (Depositor's Dame)					
•				May E. Ju			(Signature)		
				4-1	9-06				(Date)
APPLICATION NO.	FILING DATE		FIRST NAME	D INVENTOR	VTOR A		Y DOCKET NO.	CONFIRMATION NO.	
10/099,772 TITLE OF INVENTION: MI	03/15/2002 ETHOD FOR CONTROLL	ING POSITION O	•	L. Long L. INSTRUMENTS	04/19/ 01 FC: 02 FC:	'2006 CNG :1501	ND-838 UYEN1 00000 1400.00 I 300.00 I	)A	10099778
APPLN, TYPE	SMALL ENTITY	ISSUE F	EB .	PUBLICATION FEE		TOTAL	FEE(S) DUE	DATE DUE	
nonprovisional	NO	\$1400	)	\$300		,	\$1700 04/24/2006		
EXAMINER		ART UNIT		CLASS-SUBCLASS		1			
VRETTAKOS, PETER J		3739	-	600-106000		J			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to						
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)  PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.  (A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Ethicon Endo-Surgery, INC.  (B) RESIDENCE: (CITY and STATE OR COUNTRY)  Recorded: 03/15/2002  Ree1/Frame: 012715/031									2002
Please check the appropriate a		,			hual EFC	orporation of	r other private gr	oup entity 🔲 G	overnment
4a. The following fee(s) are enclosed:  Lissue Fee			4b. Payment of Fee(s):						
Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.						
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a. Applicant claims SM	ALL ENTITY status. See 3	7 CFR 1.27.	🗆 b. Applic	ant is no longer clain	ning SMAI	L ENTITY	status. See 37 C	FR 1.27(g)(2).	
The Director of the USPTO is NOTE: The Issue Fee and Pub interest as shown by the record	requested to apply the Issu Dication Fee (if required) w ds of the United Systes Pate	e Fee and Publicat ift noy by accepted and Trademark	ion Fee (if an from anyone Office.	y) or to re-apply any other than the applic	previously cant; a regis	y paid issue stered attorn	fee to the applicates or agent; or the	ation identified al ne assignee or oth	pove. her party in
Authorized Signature	Mry 1	VY		D	ate <u>A</u>	PRIL	18,20	006	
Typed or printed name	oseph F. Shirt	z/		Re	egistration :	No	31,880		
This collection of information an application. Confidentiality submitting the completed appliths form and/or suggestions of Box 1450, Alexandria, Virginia Alexandria, Virginia 22313-14 Under the Paperwork Reduction	lication form to the USPTC or reducing this burden, she is 22313-1450. DO NOT S	D. Time will vary ould be sent to the END FEES OR C	depending up Chief Inform OMPLETED	oon the individual can pation Officer, U.S. I FORMS TO THIS	o take 12 n se. Any con atent and a ADDRESS	minutes to comments on i Frademark ( . SEND TO	omplete, meludin the amount of tir Office, U.S. Depu : Commissioner	ig gathering, prepose you require to artificial for Committee for Patents, P.O.	paring, and complete

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